



STATE OF NEW YORK  
DEPARTMENT OF HEALTH

Coming Tower The Governor Nelson A. Rockefeller Empire State Plaza Albany, New York 12237

Antonia C. Novello, M.D., M.P.H., Dr.P.H.  
*Commissioner*

Dennis P. Whalen  
*Executive Deputy Commissioner*

March 3, 2003

Ms. Cheryl Tarver, Project Officer  
Partnership **Plan** Demonstration  
Centers for Medicare and Medicaid Services  
7500 Security Boulevard, Mail Stop S2-01-16  
Baltimore, **Maryland 21244-1850**

Dear **Ms.** Tarver:

**This is** in response to the revised Terms and Conditions governing the extension of New York's 1115 waiver (The Partnership Plan) which were forwarded to **us dated** February 3, 2003, Please **be** advised **that** we **accept the** revised **Terms** and Conditions.

We appreciate your assistance in finalizing the extension of **our** waiver and look forward to continuing to work with CMS **on** this project.

Sincerely,

A handwritten signature in black ink, appearing to read 'K. Shure'.

Kathleen Shure  
Director  
Office of Managed **Care**

Enclosure

cc: M. Melendez